### Case 18-11067 Doc 1 Filed 04/16/18 Entered 04/16/18 17:20:39 Desc Main Document Page 1 of 69

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Andrea	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	 Middle name
	Bring your picture	Akins	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	 Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2462	

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Case number (if known)

Debtor 1 Andrea Akins

		About Debtor 1:	4	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	I	$\square$ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Ī	Business name(s)
		EINs	1	EINs
5.	Where you live		ı	If Debtor 2 lives at a different address:
		3627 W 84th PI		
		Chicago, IL 60652  Number, Street, City, State & ZIP Code	-	Number, Street, City, State & ZIP Code
		Cook County	-	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	I	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	1	Number, P.O. Box, Street, City, State & ZIP Code
5.	Why you are choosing this district to file for	Check one:		Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Page 3 of 69 Document Case number (if known) Debtor 1 **Andrea Akins** Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District

When

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

■ No

District

☐ Yes.

Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District

Case number

11. Do you rent your residence?

☐ No.

Go to line 12.

Yes.

Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Document Page 4 of 69 Case number (if known) Debtor 1 Andrea Akins Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own

Number, Street, City, State & Zip Code

Where is the property?

perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Andrea Akins Document Page 5 of 69

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Andrea Akins		Docum		Case number	(if known)
Part	6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a pe	consumer debts? Consersonal, family, or househ	sumer debts are defir	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily money for a business or in			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consun	ner debts or busines	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7 are paid that funds will be a			erty is excluded and administrative expenses
	administrative expenses		■ No			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do you estimate that you	☐ 1-49		☐ 1,000-5,000		☐ 25,001-50,000
	owe?	■ 50-99 □ 100-1	20	□ 5001-10,000 □ 10,001-25,00		☐ 50,001-100,000 ☐ More than100,000
		☐ 200-9		_ 10,001 20,00		_ more trial roo, occ
19.	How much do you	<b>S</b> \$0 - \$	50,000	□ \$1,000,001 -		□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 □ \$50,000,001		□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		<b>—</b> \$500,	501 - \$1 IIIIII0II			
20.	How much do you estimate your liabilities	□ \$0 - \$		□ \$1,000,001 -		□ \$500,000,001 - \$1 billion
	to be?		01 - \$100,000	□ \$10,000,001 □ \$50,000,001		\$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
Part	7: Sign Below					
For		I have ex	amined this petition, and I d	leclare under penalty of p	perjury that the inform	nation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
			rney represents me and I did t, I have obtained and read			an attorney to help me fill out this
		I request	relief in accordance with the	e chapter of title 11, Unite	ed States Code, spec	ified in this petition.
		bankrupto and 3571	cy case can result in fines u			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Andrea			Signature of Debtor	2
		Executed	on <b>April 16, 2018</b>		Executed on	
			MM / DD / YYYY		MM	/ DD / YYYY

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Debtor 1 Andrea Akins Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Julie M	Gleason	Date	April 16, 2018	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Julie M GI	eason 6273536			
Printed name				
Gleason &	Gleason			
Firm name				
77 W Was	hington, Ste 1218			
Chicago, I	L 60602			
Number, Street,	City, State & ZIP Code			
Contact phone	(312) 578-9530	Email address	troy@chicagobk.com	
6273536 IL	_			
Bar number & S	tato			

Debtor 1	Andrea Akins			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	

Check if this is an amended filing

## Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your a	essets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	30,526.29
	1c. Copy line 63, Total of all property on Schedule A/B	\$	30,526.29
Par	2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	57,959.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	51,348.68
	Your total liabilities	\$	109,307.68
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,002.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,995.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bounded purpose "1411.5.0. \$ 101(0). Fill out lines 8.00 for detiction purposes 28.11.5.0. \$ 150	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

Debtor 1 Andrea Akins \_\_\_\_\_ Document Page 9 of 69 Case number (if known) \_\_\_\_\_

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_\_2,002.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in	this info	rmation to identify your	Documer	nt Page 10 of 69	10 17.20.03	oo wan
		•	ase and this ming.			
Debto	r 1	Andrea Akins First Name	Middle Name	Last Name		
ebto	r 2					
Spouse	e, if filing)	First Name	Middle Name	Last Name		
Inited	l States B	ankruptcy Court for the:	NORTHERN DISTRICT O	FILLINOIS		
Case	number					☐ Check if this is ar amended filing
						amended ming
Offic	cial F	orm 106A/B				
Sch	nedu	le A/B: Prop	ertv			12/15
ink it forma	fits best. ition. If mo	Be as complete and accurate space is needed, attach a stion.	e as possible. If two married a separate sheet to this form.	ce. If an asset fits in more than or people are filing together, both a On the top of any additional page ou Own or Have an Interest In	re equally responsible for su	pplying correct
Do y	ou own or	have any legal or equitable	interest in any residence, bu	ilding, land, or similar property?		
■ N	o. Go to Pa	art 2.				
ПΥ	es. Where	is the property?				
art 2:		e Your Vehicles				
□ N ■ Y	es .	Nicoon			Do not deduct secured cl	aims or exemptions. Put
3.1	Make: Model:	Nissan Altima	Debtor 1 only	st in the property? Check one		ed claims on Schedule D:
	Year:	2017	Debtor 1 only			
	Approxima		500 Debtor 1 and De	btor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info		☐ At least one of th	e debtors and another		
	Cosign	ed for Sister	Check if this is (see instructions)	community property	\$15,874.00	\$15,874.00
3.2	Make:	Nissan	Who has an interes	st in the property? Check one	Do not deduct secured cl	
0.2	Model:	Sentra	Debtor 1 only	a in the property . Oncox one	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
	Year:	2017	Debtor 2 only		Current value of the	Current value of the
	Approxima	ate mileage: 100	Debtor 1 and De	btor 2 only	entire property?	portion you own?
г	Other info		At least one of th	e debtors and another		
		ister's Car - Sister to le Paying	Check if this is (see instructions)	community property	\$11,572.00	\$11,572.00
	mples: Bo Io			I vehicles, other vehicles, and els, snowmobiles, motorcycle ad		

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Case 18-11067  Andrea Akins	Doc 1	Filed 04/16/18 Document	Entered 04/16/18 17:20:39 Page 11 of 69 Case number (if known)	Desc Main
DODIOI 1	Allulea Akilis				
				om Part 2, including any entries for=>	\$27,446.00
Part 3: D	Describe Your Personal and I	Household Items	s		
Do you o	own or have any legal or e	equitable inter	est in any of the follow	ing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> <sub>l</sub> □ No	chold goods and furnishin ples: Major appliances, furn s. Describe		nina, kitchenware		
		Household ( s, chairs, sof		rniture, Kitchen Appliances,	\$1,000.00
□ No				oment; computers, printers, scanners; music o	collections; electronic devices
		umer Electro s, Phones, S		visions, Radios, Computers,	\$300.00
Exam <sub>i</sub> ■ No	tibles of value ples: Antiques and figurines other collections, men s. Describe			oks, pictures, or other art objects; stamp, coin	, or baseball card collections;
Examp	ment for sports and hobb ples: Sports, photographic, musical instruments s. Describe		other hobby equipment; I	picycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	mples: Pistols, rifles, shotgu	ns, ammunitior	n, and related equipment		
11. <b>Cloth</b> <i>Exan</i> □ No	nes nples: Everyday clothes, fur s. Describe	rs, leather coat	s, designer wear, shoes,	accessories	
	Used	Clothing			\$200.00
□ No		stume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	gold, silver
	Misc.	Costume Je	welry		\$30.00
Exan ■ No	farm animals  mples: Dogs, cats, birds, ho	rses			

Official Form 106A/B

Debtor 1	Case 18-11067 Andrea Akins	7 Doc 1	Filed 04/16/18 Document	Entered 04/16/18 17:20:39 Page 12 of 69 Case number (if known	
Debior	Allurea Akilis			Case Humber (# Knowl	<i>'</i> '
■ No	other personal and house.  Give specific information		u did not already list, iı	ncluding any health aids you did not list	
	the dollar value of all of Part 3. Write that number			ny entries for pages you have attached	\$1,530.00
Part 4: D	escribe Your Financial Asse	ets			
Do you o	own or have any legal or	equitable inter	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No		-		osit box, and on hand when you file your pet	ition
				Cash on Hand	\$100.00
Exam			al accounts; certificates counts with the same ins		e houses, and other similar
	17.1.	Chase	Checking	Account	\$550.00
	17.1.	Chase	Checking	Account	\$550.00
		Chase Savings	Checking Savings A		\$550.00
Exam		Savings	Savings A	Account	
<i>Exam</i> ■ No	17.2. s, mutual funds, or publi	Savings	Savings A	Account	
Exam  No □ Yes  19. Non-p joint	17.2.  s, mutual funds, or publi  nples: Bond funds, investm	Savings  cly traded stoolent accounts we institution or is	Savings A  cks  rith brokerage firms, more ssuer name:	Account	\$0.29
Exam  No □ Yes  19. Non-p joint ■ No	s, mutual funds, or publication publications.  Display traded stock and venture  Graphs: January 17.2.	Savings  cly traded stool lent accounts w  Institution or is	Savings A  cks  with brokerage firms, more ssuer name:  accorporated and unince	Account ney market accounts	\$0.29
Exam  No  Yes  19. Non-p joint  No  Yes  20. Govel Nego Non-p	s, mutual funds, or publication ples: Bond funds, investmentation publicly traded stock and venture  s. Give specific information Nation Nation publication publication in the publication of the publication publ	Savings  Icly traded stooment accounts we institution or is interests in ir in about them ame of entity:  Indianal other personal check	Savings A  cks  with brokerage firms, more ssuer name:  acorporated and unince  and unince	Account  ney market accounts  orporated businesses, including an interest of the second secon	\$0.29
Exam  No  Yes  19. Non-pioint  No  Yes  20. Govern Negon Non-n  No	s, mutual funds, or publication publicly traded stock and venture  Grament and corporate be obtable instruments are seeds. Give specific information are gotiable instruments are seeds. Give specific information are seeds. Give specific information and corporate between the seeds are seeds.	Savings  Cly traded stockent accounts we institution or is about them ame of entity:  Indicate and other personal checker those you cannot be instituted in the control of the contro	Savings A  cks  with brokerage firms, more ssuer name:  acorporated and unince  and unince	Account  ney market accounts  prporated businesses, including an interest of ownership:  gotiable instruments missory notes, and money orders.	\$0.29
Exam No Yes  19. Non-pioint No Yes  20. Gover Nego Non-l No Yes  21. Retire Exam No	s, mutual funds, or publicity traded stock and venture  a. Give specific information National instruments include instruments are seen as Give specific information list.  Give specific information list.	Savings  Institution or is about them  Indicate and other personal check those you can about them suer name:  Institution or is about them	Savings A  cks  with brokerage firms, more ssuer name:  acorporated and unince  an egotiable and non-ne as, cashiers' checks, profinot transfer to someone	Account  ney market accounts  prporated businesses, including an interest of ownership:  gotiable instruments missory notes, and money orders.	\$0.29
Exam No Yes  19. Non-pioint No Yes  20. Gover Nego Non-l No Yes  21. Retire Exam No	is, mutual funds, or publicity traded stock and venture  a. Give specific information National instruments and corporate be instruments include inegotiable instruments are as a Give specific information list includes. Give specific information are included in the instruments are includ	Savings  Institution or is about them  Indicate and other personal check those you can about them suer name:  Institution or is about them	Savings A  cks  with brokerage firms, more ssuer name:  acorporated and unince  an egotiable and non-ne as, cashiers' checks, profinot transfer to someone	Account  ney market accounts  proporated businesses, including an interest of ownership:  agotiable instruments missory notes, and money orders. by signing or delivering them.	\$0.29

Official Form 106A/B Schedule A/B: Property page 3 Case 18-11067 Doc 1 Filed 04/16/18 Entered 04/16/18 17:20:39 Desc Main Document Page 13 of 69

Case number (if known) Debtor 1 **Andrea Akins** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... **Estimated 2017 Federal Income Tax** Refund: Received \$0.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term Life Insurance Policy w/ \$0.00 **Employer - No CSV** 

	Case 18-11067	Doc 1	Filed 04/16/18 Document	Entered 04/16/18 17:20:39 Page 14 of 69	Desc Main
Debtor 1	Andrea Akins			Case number (if known)	
If you a someo	erest in property that is done the beneficiary of a livin ne has died.  Give specific information			d surance policy, or are currently entitled to reco	eive property because
Examp ■ No	against third parties, wholes: Accidents, employment			t or made a demand for payment to sue	
■ No	contingent and unliquidat  Describe each claim	ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
■ No	ancial assets you did not Give specific information	already list			
	he dollar value of all of your tall of your			ny entries for pages you have attached	\$1,550.29
Part 5: Des	scribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
No. Go	own or have any legal or equito to Part 6.	itable interest	in any business-related pi	roperty?	
	scribe Any Farm- and Commo			n or Have an Interest In.	
■ No.	own or have any legal or Go to Part 7. . Go to line 47.	r equitable in	nterest in any farm- or c	commercial fishing-related property?	
Part 7:	Describe All Property You	Own or Have a	an Interest in That You Did	l Not List Above	
	have other property of a				

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

☐ Yes. Give specific information.......

■ No

\$0.00

Case number (if known)

Debtor 1 Andrea Akins Document Page 15 of 69

Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$27,446.00 Part 3: Total personal and household items, line 15 57. \$1,530.00 Part 4: Total financial assets, line 36 \$1,550.29 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$30,526.29 Copy personal property total \$30,526.29 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$30,526.29

Official Form 106A/B Schedule A/B: Property page 6

			HI TAUC TO OLOG	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Andrea Akins			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
2017 Nissan Altima 4500 miles Cosigned for Sister	\$15,874.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Misc. Household Goods (Bedroom Furniture, Kitchen Appliances,	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
tables, chairs, sofas) Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Used Clothing Line from Schedule A/B: 11.1	\$200.00		100%	735 ILCS 5/12-1001(a)
Ellie Holli Genedale AVD.			100% of fair market value, up to any applicable statutory limit	
Misc. Costume Jewelry Line from Schedule A/B: 12.1	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
Elifo Hori Goriodale 77D. 12.1			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B: 16.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
LINE HOLL SCHEUUIG PAD. 10.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

	Allulea Akilis				
	escription of the property and line on ule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	e: Checking Account om Schedule A/B: 17.1	\$550.00		\$550.00	735 ILCS 5/12-1001(b)
Line ii	Sill Goredaic /VE. TTT			100% of fair market value, up to any applicable statutory limit	
	gs: Savings Account	\$0.29		\$0.29	735 ILCS 5/12-1001(b)
Line ire	om Schedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
	) w/ Fed EX- 100% exempt	\$900.00		100%	735 ILCS 5/12-1006
Line iro	ine from <i>Schedule A/B</i> : <b>21.1</b>			100% of fair market value, up to any applicable statutory limit	
	ated 2017 Federal Income Tax	\$0.00		\$0.00	735 ILCS 5/12-1001(b)
	om Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	ated 2017 Federal Income Tax	\$0.00	•	\$0.00	735 ILCS 5/12-1001(g)(1)
	om Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	ou claiming a homestead exemption ct to adjustment on 4/01/19 and every			led on or after the date of adjustmen	nt.)
N	0				
□ Y	es. Did you acquire the property cover	ed by the exemption w	ithin 1	,215 days before you filed this case	?
	] No				
	] Yes				

		Document Pa	nae 18 c	of 69		
Fill in this informa	tion to identify you	ır case:				
Debtor 1	Andrea Akins					
20210	First Name	Middle Name Last	Name		-	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Last	Name			
United States Bank	runtov Court for the	: NORTHERN DISTRICT OF ILLINOIS	S			
Office Glates Barik	ruptcy Court for the.	NOTITIER DISTRICT OF TEELINGS			-	
Case number						
(if known)					☐ Check	if this is an
					amen	ded filing
000 : 15	4000					
Official Form	106D					
Schedule D	: Creditors	Who Have Claims Sec	cured	by Propert	V	12/15
				<u> </u>	<u> </u>	
		If two married people are filing together, bo out, number the entries, and attach it to this				
1. Do any creditors ha	wa claims sacurad h	v vour property?				
	_		ali da - M	hava a substant of the	and the second second	
■ No. Check the control of the c	nis box and submit ti	his form to the court with your other sche	dules. You	have nothing else t	to report on this form.	
Yes. Fill in a	II of the information	below.				
Part 1: List All S	Secured Claims					
	ime If a creditor has r	more than one secured claim, list the creditor s	enarately	Column A	Column B	Column C
		s a particular claim, list the other creditors in Pa		Amount of claim	Value of collateral	Unsecured
much as possible, list	the claims in alphabeti	cal order according to the creditor's name.		Do not deduct the	that supports this	portion
2.1 Nmac		Describe the property that secures the cla	aim:	value of collateral. \$33,416.00	claim \$15,874.00	If any \$17,542.00
Creditor's Name		2017 Nissan Altima 4500 miles		Ψ33,410.00	Ψ13,07 4.00	Ψ17,542.00
		Cosigned for Sister				
Attn: Bankr	untcv					
Po Box 660		As of the date you file, the claim is: Check	all that			
Dallas, TX 7		apply.  Contingent				
Number, Street, Ci	ty, State & Zip Code	☐ Unliquidated				
, , , .	,,	☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mortga	age or secure	ed		
Debtor 2 only		car loan)	·			
Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic	'e lien)			
☐ At least one of the	•	☐ Judgment lien from a lawsuit	3 11611)			
☐ Check if this clair		Other (including a right to offset)				
community debt	ii relates to a	— Other (including a right to onset)				
	Opened					
	10/17 Last Active					
Date debt was incurr		Last 4 digits of account number	0001			
Date debt was incur	3/23/10					
O.O. Neess		Describe the manufacturate of account the all-		¢04 E42 00	¢44 570 00	£42.074.00
2.2 Nmac Creditor's Name		Describe the property that secures the cla	——————————————————————————————————————	\$24,543.00	\$11,572.00	\$12,971.00
Orealtor 3 Marrie		2017 Nissan Sentra 10000 miles Other Sister's Car - Sister to				
		Continue Paying				
Attn: Bankr		As of the date you file, the claim is: Check	all that			
Po Box 660		apply.				
Dallas, TX 7		Contingent				
Number, Street, Ci	ty, State & Zip Code	Unliquidated				
Who ower the dela	2 Chook and	Disputed				
Who owes the debt	r Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgacar loan)	age or secure	ea		
Debtor 2 only						
Debtor 1 and Debt		Statutory lien (such as tax lien, mechanic	's lien)			
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit				

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Debtor 1 Andrea	Akins		Case	number (if know)	
First Name	Middle N	Name Last Name	-		
☐ Check if this clair community debt	n relates to a	☐ Other (including a right to offset)			
Date debt was incurr	Opened 01/17 Last Active ed 3/12/18	Last 4 digits of account numb	<sub>oer</sub> 0001		
	ge of your form, add	Column A on this page. Write that numl I the dollar value totals from all pages.	per here:	\$57,959.00 \$57,959.00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0000 10 11001	Document	Page 20 of 69	COO MAIN
Fill in t	this information to identify your o			
Debtor	1 Andrea Akins			
Dobtoi	First Name	Middle Name	Last Name	
Debtor				
(Spouse i	if, filing) First Name	Middle Name	Last Name	
United	States Bankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS	
Case n	umber			
(if known)				Check if this is an
				amended filing
Offici	al Form 106E/F			
	edule E/F: Creditors W	ho Have Unsecured	d Claime	12/15
			ITY claims and Part 2 for creditors with NONPRIORITY c	
Schedul eft. Atta	e D: Creditors Who Have Claims Secu	red by Property. If more space is	<ul> <li>Do not include any creditors with partially secured clair s needed, copy the Part you need, fill it out, number the report in a Part, do not file that Part. On the top of any ad</li> </ul>	entries in the boxes on the
Part 1:	List All of Your PRIORITY Un	secured Claims		
1. Do	any creditors have priority unsecured	d claims against you?		
	No. Go to Part 2.			
	Yes.			
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims		
3. Do	any creditors have nonpriority unsec	ured claims against you?		
	No. You have nothing to report in this pa	art. Submit this form to the court wit	th your other schedules.	
_	Yes.			
uns	ecured claim, list the creditor separately n one creditor holds a particular claim, li	for each claim. For each claim liste	the creditor who holds each claim. If a creditor has more t ed, identify what type of claim it is. Do not list claims already u have more than three nonpriority unsecured claims fill out t	included in Part 1. If more
				Total claim
4.1	Access Community Health	Last 4 digits of ac	count number	\$165.00
	Nonpriority Creditor's Name 8946 Solution Center	When was the de	ht incurred?	
	Chicago, IL 60677	When was the de		
	Number Street City State Zlp Code	As of the date you	u file, the claim is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and and	ther Type of NONPRIC	DRITY unsecured claim:	
	☐ Check if this claim is for a comm	nunity		
	debt		sing out of a separation agreement or divorce that you did no	ot
	Is the claim subject to offset?	report as priority cl		
	■ No	<u> </u>	on or profit-sharing plans, and other similar debts	
	Yes	Other. Specify		

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Case number (if know)

Debto	Andrea Akins		Case number (if know)			
4.2	Advocate Christ Medical Center Nonpriority Creditor's Name	Last 4 digits of account number		\$2,605.00		
	Attn: Patient Accounts 4440 W. 95th St. Oak Lawn, IL 60453	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Medical / D	ental Bill			
4.3	Advocate Medical Group  Nonpriority Creditor's Name	Last 4 digits of account number		\$265.00		
	PO box 92523	When was the debt incurred?				
	Chicago, IL 60675  Number Street City State Zlp Code	As of the data way file the plains	in Object all that and to			
	Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	<u> </u>	<u> </u>				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:			
	☐ At least one of the debtors and another	Student loans	a Gain.			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	<u></u>	aration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing				
	Yes	Other. Specify				
4.4	Affirm Inc	Look 4 digito of passing groups	EVCV	¢209.00		
4.4	Nonpriority Creditor's Name	Last 4 digits of account number	FKCK	\$308.00		
	Affirm Incorporated Po Box 720	When was the debt incurred?	Opened 03/18 Last Active 3/03/18			
	San Francisco, CA 94104  Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Offect all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:  ☐ Student loans				
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Unsecured				
		- Guion opoony				

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Debtor 1 Andrea Akins Case number (if know) 4.5 **AMCA** Last 4 digits of account number \$354.00 Nonpriority Creditor's Name **Collection Agency** When was the debt incurred? 4 Westchester Plaza, Building 4 Elmsford, NY 10523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify AMCA/American Medical Collection \$131.00 2170 4.6 Last 4 digits of account number Agency Nonpriority Creditor's Name Opened 10/22/17 Attention: Bankruptcy When was the debt incurred? 4 Westchester Plaza, Suite 110 Elmsford, NY 10523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Laboratory Corp Of America ☐ Yes **AMCA/American Medical Collection** 8860 \$65.00 4.7 Agency Last 4 digits of account number Nonpriority Creditor's Name Attention: Bankruptcy When was the debt incurred? Opened 10/22/17 4 Westchester Plaza, Suite 110 Elmsford, NY 10523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other, Specify Laboratory Corp Of America ☐ Yes

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Debtor 1 Andrea Akins Case number (if know) 4.8 Capital One Last 4 digits of account number 2207 \$1.244.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/15 Last Active Po Box 30285 When was the debt incurred? 2/10/18 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.9 **Capital One** Last 4 digits of account number 8422 \$1,145.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/16 Last Active Po Box 30285 When was the debt incurred? 2/10/18 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.1 **Capital One** 7901 \$790.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 03/15 Last Active Attn: Bankruptcy Po Box 30285 When was the debt incurred? 1/18/18 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

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Debtor 1 Andrea Akins Case number (if know) 4.1 **Chase Card Services** 3529 \$578.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/16 Last Active **Correspondence Dept** Po Box 15298 When was the debt incurred? 1/18/18 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Childrens Surgical Foundation** \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 737 N Michigan Ave #1650 When was the debt incurred? Chicago, IL 60611 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 Citibank/The Home Depot 4594 \$574.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 04/15 Last Active Centralized Bankruptcy Po Box 790034 When was the debt incurred? 1/26/18 St Louis, MO 63179 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

Official Form 106 E/F

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Debtor 1 Andrea Akins Case number (if know) 4.1 Comenity Bank/Ashley Stewart 3548 \$290.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 01/15 Last Active Attn: Bankruptcy Dept Po Box 182125 When was the debt incurred? 3/24/18 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Comenity Bank/Avenue 8087 \$391.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 01/15 Last Active Po Box 182125 When was the debt incurred? 3/24/18 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 Comenity Bank/Carsons 4429 \$534.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 11/14 Last Active Attn: Bankruptcy Dept Po Box 182125 When was the debt incurred? 9/20/15 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Case number (if know)

Allulea Akilis		Case number (ii know)	
Comenity Bank/Harlem Furniture	Last 4 digits of account number	6137	\$1,000.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125	When was the debt incurred?	Opened 06/15 Last Active 10/11/17	
Columbus, OH 43218  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Comenity Bank/Pier 1	Last 4 digits of account number	6658	\$368.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125	When was the debt incurred?	Opened 12/16 Last Active 3/17/18	
Columbus, OH 43218  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Comenity Bank/Victoria Secret	Last 4 digits of account number	3679	\$944.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 45318	When was the debt incurred?	Opened 01/15 Last Active 2/10/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	og plans, and other similar debts	
	·		
□Yes	■ Other, Specify Charge Acc	COUNT	

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Debtor 1 Andrea Akins Case number (if know) 4.2 Comenity Capital/mprc 8137 \$825.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 03/15 Last Active Attn: Bankruptcy Dept Po Box 182125 When was the debt incurred? 11/12/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Convergent Outsourcing, Inc. \$349.00 Last 4 digits of account number Nonpriority Creditor's Name 10750 Hammerly Blvd, #200 When was the debt incurred? Houston, TX 77043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collections 4.2 Credit One Bank 6393 \$335.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 02/18 Last Active Attn: Bankruptcy Po Box 98873 When was the debt incurred? 3/23/18 Las Vegas, NV 89193 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Andrea Akins Case number (if know) 4.2 **DirecTV** \$260.00 Last 4 digits of account number 3 Nonpriority Creditor's Name **Payment Center** When was the debt incurred? PO Box 78626 Phoenix, AZ 85062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility ☐ Yes 4.2 **Dynamic Recovery Solutions** \$784.00 Last 4 digits of account number 4 Nonpriority Creditor's Name PO Box 25759 When was the debt incurred? Greenville, SC 29616 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Genesis Bc/celtic Bank 8952 \$332.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 02/18 Last Active 268 S State St Ste 300 When was the debt incurred? 4/04/18 Salt Lake City, UT 84111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card

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Debtor 1 Andrea Akins Case number (if know) 4.2 **Great American Finance** 0207 \$622.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 06/17 Last Active Attn: Bankruptcy 2/25/18 20 N Wacker Dr. Suite 2275 When was the debt incurred? Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Household Goods ☐ Yes 4.2 **Great American Finance** \$659.00 Last 4 digits of account number Nonpriority Creditor's Name 20 N Wacker Dr #2275 When was the debt incurred? Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Harris & Harris \$3.306.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 111 W Jackson #400 When was the debt incurred? Medical Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes

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Debtor 1 Andrea Akins Case number (if know) **IICRDP** -Integrated Imaging 42 \$35.00 9 Consulta Last 4 digits of account number Nonpriority Creditor's Name PO Box 95040 When was the debt incurred? Chicago, IL 60694 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Illinois Department of Revenue Unknown Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? **Bankruptcy Section** PO Box 64338 Chicago, IL 60664-0338 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice Only 4.3 \$7,000.00 **Illinois Dept of Employment Securit** Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Unit Collection** When was the debt incurred? **Subdivis** 33 S State St 10th Floor Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Overpayment of Benefits

☐ Yes

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Debtor 1 Andrea Akins Case number (if know) 4.3 Internal Revenue Service Unknown Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Only ☐ Yes 4.3 **Kay Jewelers** 2506 Last 4 digits of account number \$3,063.00 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/16 Last Active 3/02/18 Po Box 1799 When was the debt incurred? Akron, OH 44309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.3 Kohls/Capital One 1628 \$1.571.00 Last 4 digits of account number Nonpriority Creditor's Name **Kohls Credit** Opened 11/14 Last Active Po Box 3120 When was the debt incurred? 2/14/18 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Andrea Akins Case number (if know) Laboratory Corp of America 4.3 \$132.00 5 **Holdings** Last 4 digits of account number Nonpriority Creditor's Name PO Box 2240 When was the debt incurred? **Burlington, NC 27216** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Lurie Children's Hospital of Chicag \$575.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 4066 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only  $\square$  At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 8879 \$403.00 Med Business Bureau Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr #400 When was the debt incurred? **Opened 01/17** Park Ridge, IL 60068 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community deht ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Swedish Emergency ☐ Yes Other. Specify Assoc

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Debtor 1 Andrea Akins Case number (if know) 4.3 Med Business Bureau 0007 \$206.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1460 Renaissance Dr #400 When was the debt incurred? **Opened 01/18** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Swedish Covenant** ☐ Yes Other. Specify Hospital 4.3 Midwest Diagnostic Pathology \$3.00 Last 4 digits of account number 9 Nonpriority Creditor's Name PO Box 578 When was the debt incurred? Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify **Neb Medical Services** \$19.86 Last 4 digits of account number Nonpriority Creditor's Name 7646 W 159th St When was the debt incurred? Orland Park, IL 60462 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Debtor	1 Andrea Akins	Document Page 34 of 69 Case number (if know)	
4.4			
1	Nephrology Associates of N Illinois	Last 4 digits of account number	\$36.00
	Nonpriority Creditor's Name PO Box 3369	When was the debt incurred?	
	Oak Park, IL 60303		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Dan consiste has		<b>\$7,000,00</b>
2	Progenity Inc  Nonpriority Creditor's Name	Last 4 digits of account number	\$7,000.00
	5230 S State	When was the debt incurred?	
	Ann Arbor, MI 48108		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Providea Health	Last 4 digits of account number	\$122.82
3	Nonpriority Creditor's Name		*
	10260 W 191st St	When was the debt incurred?	
	Mokena, IL 60448  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Oneck all that apply	
	■ Debtor 1 only	C Continued	
	<u> </u>	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed  Type of NONPRIORITY unsequend claim:	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No □ Yes

Other. Specify

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Debtor	1 Andrea Akins	Case number (if know)	
4.4	Pulmonary Consultants SC	Last 4 digits of account number	\$222.00
	Nonpriority Creditor's Name 12820 S Ridgeland Ave, Ste B Palos Heights, IL 60463	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Radiology Imaging Consultants Nonpriority Creditor's Name	Last 4 digits of account number	\$33.00
	75 Remittance Drive Dept 1324 Chicago, IL 60675	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Swedish Covenant Hospital	Last 4 digits of account number	\$207.00
	Nonpriority Creditor's Name 5145 North California Avenue Chicago, IL 60625	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify

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Debtor 1 Andrea Akins Case number (if know) 4.4 Syncb/PLCC 3180 \$586.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/16 Last Active Po Box 965060 When was the debt incurred? 1/19/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.4 Syncb/Toys R Us \$996.00 6134 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/15 Last Active Po Box 965060 When was the debt incurred? 2/06/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.4 Synchrony Bank/ JC Penneys 4737 \$3,555.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 06/15 Last Active Attn: Bankruptcy Dept Po Box 965060 When was the debt incurred? 3/21/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Andrea Akins Case number (if know) 4.5 Synchrony Bank/ Old Navy 3401 \$809.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 03/15 Last Active Attn: Bankruptcy Dept Po Box 965060 When was the debt incurred? 1/24/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.5 Synchrony Bank/Amazon 0508 \$1,173.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 12/14 Last Active Po Box 965060 When was the debt incurred? 2/13/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.5 Synchrony Bank/Lowes 8061 \$454.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 04/15 Last Active Attn: Bankruptcy Dept Po Box 965060 When was the debt incurred? 2/14/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

Official Form 106 E/F

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Debtor 1 Andrea Akins Case number (if know) 4.5 Synchrony Bank/TJX 1407 \$646.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 05/15 Last Active Po Box 965060 When was the debt incurred? 1/28/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.5 Synchrony Bank/Walmart 0500 \$1,771.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 02/15 Last Active Po Box 965060 When was the debt incurred? 2/16/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.5 **Target** 5849 \$790.00 Last 4 digits of account number Nonpriority Creditor's Name **Target Card Services** Opened 3/08/16 Last Active Mail Stop NCB-0461 When was the debt incurred? 1/28/18 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debt	Andrea Akins	———————	Case number (if know)						
4.5	Transworld Systems	Lord Botto of control of		\$79.00					
6	Nonpriority Creditor's Name 507 prudential Rd.	Last 4 digits of account number  When was the debt incurred?		φ <i>1</i> 9.00					
	Horsham, PA 19044								
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply						
	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts						
	Yes	Other. Specify							
4.5	United Deceyons Consider LLC			¢20.00					
7	United Recovery Service, LLC  Nonpriority Creditor's Name	Last 4 digits of account number		\$38.00					
	18525 Torrence Ave, Ste C-6 Lansing, IL 60438	25 Torrence Ave, Ste C-6 When was the debt incurred?							
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only								
	□ Debtor 2 only □ Unliquidated								
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims							
	No	☐ Debts to pension or profit-sharing							
	Yes	Other. Specify							
4.5	Visa Dept Store National								
8	Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	<u>1710</u>	\$100.00					
	Attn: Bankruptcy Po Box 8053 Mason, OH 45040	When was the debt incurred?	Opened 01/15 Last Active 7/19/17						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Debtor 2 only ☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure							
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts							
	debt Is the claim subject to offset?								
	■ No								
	☐ Yes ☐ Other, Specify Charge Account								

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Andrea Akins		Case number (if know)					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
ICS PO Box 1010 Tinley Park, IL 60477	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?					
T-Mobile Bankruptcy Team	Line <b>4.21</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 53410 Bellevue, WA 98015		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Believde, WA 90013	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?					
US Cellular	Line 4.24 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
8410 W. Bryn Mawr, Ste 700 Chicago, IL 60631		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Cincago, in obodi	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?					
Vengroff Williams	Line 4.42 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 4155 Sarasota, FL 34230		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Odi 030ta, 1 L 34230	Last 4 digits of account number						

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					_
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f	Student loans	6f.	\$	Total Claim 0.00
Total claims	OI.	otacii isans	or.	Ψ	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	51,348.68
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	51,348.68

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			311 1 1440 41 01 03	
Fill in this infor	mation to identify your	case:		
Debtor 1	Andrea Akins			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

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		Docume	ent Pade 42 d	01 69	
Fill in this	information to identify your	case:			
Debtor 1	Andrea Akins				
DODIO! !	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Star	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	ber				Charle if this is an
(II KIIOWII)					Check if this is an amended filing
					amenaea ming
Official	l Form 106H				
	lule H: Your Cod	ohtore			40/45
Scried	ule II. Toul Cou	EDIOI 2			12/15
1. <b>Do</b> y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
☐ Yes	;				
	h <b>in the last 8 years, have you</b> a, California, Idaho, Louisiana				ites and territories include
■ No	Go to line 3.				
	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
	,	,g q	· · · · · · · · · · · · · · · · · · ·		
in line Form	2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make	sure you have listed the ci	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt at apply:
3.1				☐ Schedule D. line	
	Name			Schedule E/F, line	
				☐ Schedule G, line _	
_					
	Number Street City	State	ZIP Code		
	- 1		0000		
				_	
3.2	Nama			Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street	0	715.0	_	
	City	State	ZIP Code		

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	in this information to identify your optor 1  Andrea Akir								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS						
(If kr	se number nown)						d filing	stpetition chapte	r
	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome						12/	/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filir ir spouse is not filing wi	ng jointly, and your spou th you, do not include in	se is form	liv atio	ing with you, incl on about your spo	ude informatio ouse. If more s	n about your pace is needed	I,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing	spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Emple	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	☐ Not employed		
	employers.	Occupation	Currier						
	Include part-time, seasonal, or self-employed work.	Employer's name	FedEx						
	Occupation may include student or homemaker, if it applies.	Employer's address	PO BOX 94515 Palatine, IL 60094						
		How long employed th	nere? 4 Years						
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the duse unless you are separated.	late you file this form. If $y$	ou have nothing to report	for a	ny l	ine, write \$0 in the	space. Include	your non-filing	
	u or your non-filing spouse have m e space, attach a separate sheet to		mbine the information for	all en	nplo	oyers for that perso	n on the lines b	elow. If you nee	:d
						For Debtor 1	For Debtor 2 non-filing s		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,002.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3	+\$	0.00	+\$	N/A	

Calculate gross Income. Add line 2 + line 3.

2,002.00

N/A

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Deb	tor 1	Andrea Akins	_	Case r	number (if known)			
					Debtor 1	non-f	ebtor 2 or iling spouse	
	Cop	y line 4 here	4.	\$	2,002.00	\$	N/A	-
5.	List	all payroll deductions:						
-	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	=
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	•
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g. 5h.	Union dues Other deductions Specific	5g. 5h.+	\$	0.00	\$ + \$	N/A	-
•		Other deductions. Specify:	_	· —	0.00	· —	N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	=
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,002.00	\$	N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	•
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	-
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$	2	2,002.00 + \$		N/A = \$	2,002.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						,
11.	Incl othe	the all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify:	depen		•		hedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$	
13.	Do	you expect an increase or decrease within the year after you file this form	?				monthly	y income
		No.						
		Yes. Explain: On Medical Disability						

Filli	n this informa	ation to identify yo	our case:					
Debt	tor 1	Andrea Akin	s			Chec	ck if this is:	
							An amended filing	
Debt								wing postpetition chapter
(Spo	use, if filing)						13 expenses as of	the following date:
Unite	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	IOIS	-	MM / DD / YYYY	
Case	e number							
(If kn	nown)							
Of	ficial Fo	rm 106J						
Sc	hedule	J: Your	Exper	ises				12/1
Be a info	as complete rmation. If m nber (if know	and accurate as nore space is ne n). Answer ever	possible eded, atta y questio	. If two married people a ich another sheet to this				
Part 1.	Is this a joir	ribe Your House nt case?	enoia					
•••	No. Go to							
			in a senar	ate household?				
			a copa.					
			st file Offici	al Form 106J-2, Expense	s for Senarate House	ehold of Deb	tor 2	
				ar om 1000 2, <i>Expense</i>	o ror coparato ricaci	21101G 01 D0D	101 2.	
2.	Do you hav	e dependents?	☐ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Child		3 months	■ Yes
								□ No
					Child		5	Yes
								□ No
								☐ Yes
								□ No
_	Da							☐ Yes
3.	expenses o	oenses include f people other t d your depende	han $_{oxdotsim}$	No Yes				
exp	mate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a sup				
the		h assistance an		government assistance cluded it on <i>Schedule I:</i>			Your exp	enses
4.		or home owners		ses for your residence. or lot.	Include first mortgag	e 4. \$	S	900.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$	S	0.00
	4b. Prope	erty, homeowner's	s, or renter	's insurance		4b. \$	S	0.00
			•	upkeep expenses		4c. \$		0.00
_		owner's associat				4d. \$	· .	0.00
5	Additional i	mortgage navme	ants for ve	<b>our residence</b> , such as ho	ance privity loans	5 9		0.00

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Debto	or 1	Andrea A	Akins	Case num	ber (if kno	own)
s. <b>ι</b>	Jtilitie					
			heat, natural gas	6a.	\$	0.00
		-	ver, garbage collection	6b.		0.00
			, cell phone, Internet, satellite, and cable services	6c.	·	75.00
		•	•		·	
		Other. Spe	•	6d.		0.00
			keeping supplies	7.		450.00
			hildren's education costs	8.		0.00
			y, and dry cleaning	9.		100.00
		•	roducts and services	10.	\$	100.00
1. <b>I</b>	Medica	al and der	ital expenses	11.	\$	100.00
2. 1	<b>Fransp</b>	portation.	Include gas, maintenance, bus or train fare.		_	070.00
			r payments.	12.	·	270.00
3. <b>E</b>	Enterta	ainment, d	clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
4. (	Charita	able conti	ibutions and religious donations	14.	\$	0.00
5. <b>I</b>	nsura	ince.				
[	Do not	include in	surance deducted from your pay or included in lines 4 or 2	0.		
1	15a. L	Life insura	nce	15a.	\$	0.00
1	15b. H	Health insu	urance	15b.	\$	0.00
1	15c. \	Vehicle ins	urance	15c.	\$	0.00
			rance. Specify:	15d.		0.00
			clude taxes deducted from your pay or included in lines 4 or		Ť —	0.00
	Specify		stade taxoo doddotod fforfi your pay or included iff iiiles 4 t	16.	\$	0.00
		·	ase payments:		* —	0.00
			ents for Vehicle 1	17a.	\$	0.00
		. ,	ents for Vehicle 2	17a. 17b.	·	0.00
				176. 17c.	·	
		Other. Spe				0.00
		Other. Spe	•	17d.	<b>&gt;</b>	0.00
3. Y	Your p	payments	of alimony, maintenance, and support that you did not	report as rm 1061). 18.	•	0.00
` (	aeauci	tea trom y	your pay on line 5, Schedule I, Your Income (Official Fo		φ —	
			you make to support others who do not live with you.		<b>&gt;</b>	0.00
	Specify	,		19.		
			erty expenses not included in lines 4 or 5 of this form of			
			on other property	20a.	· —	0.00
		Real estate		20b.	·	0.00
2	20c. F	Property, h	omeowner's, or renter's insurance	20c.		0.00
2	20d. N	Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
2	20e. H	Homeowne	er's association or condominium dues	20e.	\$	0.00
1. (	Other:	Specify:		21.	+\$	0.00
		,			<u> </u>	0.00
			nonthly expenses			
2	22a. Ad	dd lines 4	through 21.		\$	1,995.00
2	22b. C	opy line 22	2 (monthly expenses for Debtor 2), if any, from Official For	n 106J-2	\$	
			and 22b. The result is your monthly expenses.		\$	1,995.00
-	O. A	aa iii lo 226	tana 225. The result to your monthly expenses.		Ψ—	1,333.00
3. (	Calcul	late your r	nonthly net income.			
2	23a. (	Copy line	2 (your combined monthly income) from Schedule I.	23a.	\$	2,002.00
2	23b. (	Copy your	monthly expenses from line 22c above.	23b.	-\$	1,995.00
-		. , ,	, ,	_3~.		
2	23c. S	Subtract vo	our monthly expenses from your monthly income.			
-			is your monthly net income.	23c.	\$	7.00
					1	
4. <b>[</b>	Οο γοι	u expect a	n increase or decrease in your expenses within the ye	ar after you file this	s form?	
F	or exa	ımple, do yo	u expect to finish paying for your car loan within the year or do you			o increase or decrease because of a
			erms of your mortgage?			
I	No.					
	□ Yes		Explain here:			

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Fill in this inf	formation to identify your	rase:			
Debtor 1		ouse.			
Deptor 1	Andrea Akins First Name	Middle Name	Last Name		
Debtor 2	. not rains	madio Hamo	zaot Hamo		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				0	Check if this is an
					amended filing
You must file		le bankruptcy schedules n connection with a bank	or amended schedules	rrect information. s. Making a false statement, cor in fines up to \$250,000, or impr	
S	ign Below				
Did you	pay or agree to pay some	one who is NOT an attori	ney to help you fill out l	bankruptcy forms?	
■ No					
☐ Yes	s. Name of person				tition Preparer's Notice, ature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sumi	mary and schedules file	ed with this declaration and	
X /s/ A	ndrea Akins		x		
	rea Akins		Signature of	Debtor 2	
Signa	ature of Debtor 1				
Date	April 16, 2018		Date		

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Fill in	this information	to identify you	r case:				
Debtor		drea Akins					
Debtor		Name	Middle Name		Last Name		
(Spouse		Name	Middle Name		Last Name		
United	l States Bankrupt	cy Court for the:	NORTHERN DISTRIC	T OF ILL	INOIS		
_		•					
(if known	number n)						Check if this is an mended filing
							g
Offic	cial Form	107					
			Affairs for Indiv	ridual	ls Filina for E	Bankruptcv	4/1
informa numbe	ation. If more sper (if known). Ans	pace is needed, swer every que	attach a separate sheet stion.	to this fo	orm. On the top of an	equally responsible for sup y additional pages, write you	
Part 1:	Give Details	About Your Ma	arital Status and Where Y	ou Lived	з ветоге		
1. W	hat is your curre	ent marital statu	ıs?				
	<b>l</b> Married						
	Not married						
2. Du	uring the last 3 y	ears, have you	lived anywhere other tha	an where	you live now?		
	l No						
	Yes. List all of	the places you I	ived in the last 3 years. Do	not inclu	ude where you live nov	٧.	
D	ebtor 1 Prior Ad	dress:	Dates Debtor lived there	1	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
						nity property state or territory tico, Texas, Washington and W	
	l No l Yes. Make sur	e you fill out <i>Scl</i>	nedule H: Your Codebtors (	(Official F	Form 106H).		
Part 2	Explain the	Sources of You	r Income				
I alt 2	Explain the	Jources of Tou	i ilicollie				
Fil	II in the total amo	unt of income yo	nployment or from opera u received from all jobs an have income that you rece	d all bus	inesses, including part		ndar years?
	l No						
	Yes. Fill in the	details.					
			Debtor 1			Debtor 2	
			Sources of income	Gre	oss income	Sources of income	Gross income
			Check all that apply.	,	fore deductions and clusions)	Check all that apply.	(before deductions and exclusions)
	January 1 of cur ate you filed for b		☐ Wages, commissions, bonuses, tips		\$6,006.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business			☐ Operating a business	
	st calendar year ary 1 to Decemb		☐ Wages, commissions, bonuses, tips	ı	\$25,766.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business			☐ Operating a business	
Official F	Form 107			Affairs fo	r Individuals Filing for B		page

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Document Page 49 of 69 Case number (if known) Debtor 1 Andrea Akins **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$24,275.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

**Total amount** 

paid

Amount you

still owe

Dates of payment

Yes. List all payments to an insider.

Insider's Name and Address

Reason for this payment

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13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address:

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total Value Describe what you contributed Dates you more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code)

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Nο

Yes. Fill in the details.

Name of trust Description and value of the property transferred **Date Transfer was** made

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	Na	Ime of site	Governmental un	it	Enviro	onmental law, if you	Date of notice	
		Yes. Fill in the details.						
24.	Has	s any governmental unit notified you tha	t you may be liable or p	otentially liable	under or ii	n violation of an environr	nental law?	
•		all notices, releases, and proceedings the	, ,		•			
		zardous material means anything an env cardous material, pollutant, contaminant,		as a hazardous	waste, haz	zardous substance, toxic	substance,	
_	<ul><li>Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.</li></ul>							
	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.				statutes or			
. O.		•		ulation concern	ing polluti	on, contamination, releas	ses of hazardous or	
	the	<ul> <li>Give Details About Environmental Info</li> <li>purpose of Part 10, the following definiti</li> </ul>						
	Ad	idress (Number, Street, City, State and ZIP Code)	(Number, Street, City, S Code)		2 0 3 0 1 1 1 0 0	bb-2/2)	Taide	
	Ov	Yes. Fill in the details.	Where is the prop	perty?	Describe	the property	Value	
	•	No						
		Identify Property You Hold or Control for Someone Else  Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
		<b>-</b>	State and ZIP Code)	,				
		Ime of Storage Facility Idress (Number, Street, City, State and ZIP Code)	to it?			the contents	Do you still have it?	
		Yes. Fill in the details.	140		<b>D</b> "	the contents	D	
22.	Hav	ve you stored property in a storage unit o	or place other than your	nome within 1	year betor	e you filed for bankruptc	y?	
00		Idress (Number, Street, City, State and ZIP Code)	Address (Number, S State and ZIP Code)	, ,,			have it?	
	□ Na	Yes. Fill in the details. Ime of Financial Institution	Who else had acc	cess to it?	Describe	the contents	Do you still	
	•	No						
21.		you now have, or did you have within 1	year before you filed for	bankruptcy, an	ıy safe dep		tory for securities,	
		Ime of Financial Institution and Idress (Number, Street, City, State and ZIP de)	Last 4 digits of account number	Type of accou	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
		Yes. Fill in the details.						
	not	uses, pension funds, cooperatives, asso No	ciations, and other final	icial institutions	5.			
20.	sol Inc	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage						
		<del>_</del>		·	Ū		ur henefit closed	
Pai	rt 8:	List of Certain Financial Accounts, Inc	struments. Safe Denosi	t Boxes and Sto	orage Unit	•		

ZIP Code)

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25.	Have you notified any governmental unit of	f any release of hazardous material?						
	_	·						
	No Yes. Fill in the details.							
		Covernment and all visit	Fundamental law if you	Data of matica				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or ad	ministrative proceeding under any envir	ronmental law? Include settlement	s and orders.				
	_	, , ,						
	No							
	Yes. Fill in the details.	Court on commun	Natura of the coop	Otatus of the				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11: Give Details About Your Business or	Connections to Any Business						
27.	Within 4 years before you filed for bankrup	toy did you own a husiness or have an	y of the following connections to a	nny husinass?				
21.		in a trade, profession, or other activity,	,	ny business:				
	_		-					
		pany (LLC) or limited liability partnershi	p (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing ex	ecutive of a corporation						
	☐ An owner of at least 5% of the votir	ng or equity securities of a corporation						
	■ No. None of the above applies. Go to	Part 12.						
	_							
	Yes. Check all that apply above and fill in the details below for each business.  Business Name  Describe the nature of the business  Employer Identification number							
	Address		Do not include Social Securit					
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper  Dates business existed						
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial							
	stitutions, creditors, or other parties.							
	■ No							
	Yes. Fill in the details below.							
	Name	Date Issued						
	Address (Number, Street, City, State and ZIP Code)							
Par	t 12: Sign Below							
rai	Sign Below							
	ve read the answers on this <i>Statement of Fi</i> true and correct. I understand that making a							
with	a bankruptcy case can result in fines up to			madd iii coimection				
18 L	J.S.C. §§ 152, 1341, 1519, and 3571.							
/s/	Andrea Akins							
	drea Akins nature of Debtor 1	Signature of Debtor 2						
Sig	mature of Deptor 1							
Dat	e April 16, 2018	Date						
Did	you attach additional pages to Your Statem	ent of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form	107)?				
	'es							
Did	you pay or agree to pay someone who is no	t an attorney to help you fill out bankru	ptcy forms?					
	lo							
	es. Name of Person Attach the Bankro		,					
Offic	ial Form 107 Stater	nent of Financial Affairs for Individuals Filing	for Bankruptcy	page (				

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Case number (if known) Document

Debtor 1 Andrea Akins

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Fill in this infor	mation to identify your o	case:		
Debtor 1	Andrea Akins			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
(Spouse II, IIIIIIg)	riistivanie			
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 108			
			danala Etta a Unidan Obianta	<b></b>
Stateme	nt of Intentio	n tor inaiv	riduals Filing Under Chapte	er / 12/15
	lividual filing under chap	. •	I out this form if:	
_	ve claims secured by you			
	sed personal property a		ot expired.  you file your bankruptcy petition or by the date se	t for the meeting of creditors
			e time for cause. You must also send copies to the	
on the	form			
If two married po	eople are filing together	in a joint case, bo	oth are equally responsible for supplying correct in	formation. Both debtors must
	nd date the form.	•	. ,	
Be as complete	and accurate as possible	e. If more space is	s needed, attach a separate sheet to this form. On	the top of any additional pages.
	our name and case nun			top of any additional pages,
David Line	/	0		
Part 1: List Y	our Creditors Who Have	Secured Claims		
		rt 1 of Schedule D	: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
information be	elow. reditor and the property th	nat is collateral	What do you intend to do with the property that	Did you claim the property
,			secures a debt?	as exempt on Schedule C?
Creditor's N	Nmac		☐ Surrender the property.	□ No
name:	Miliac		☐ Retain the property and redeem it.	□ N0
			☐ Retain the property and redeem to	■ Yes
Description of	2017 Nissan Altima		Reaffirmation Agreement.	
property	Cosigned for Siste	r	Retain the property and [explain]:	
securing debt	:		Cosignor to Continue to Pay	_
Creditor's	Nmac		☐ Surrender the property.	■ No
name:			Retain the property and redeem it.	— 110
Description of	f 2017 Nissan Sentra	10000 miles	☐ Retain the property and enter into a	☐ Yes
Description of	ı ∠uı/ Nissan Sentra	i iuuuu miles	Reaffirmation Agreement	

Part 2: List Your Unexpired Personal Property Leases

**Continue Paying** 

Other Sister's Car - Sister to

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Retain the property and [explain]:

**Cosignor to Continue Paying** 

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

property

securing debt:

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Debtor 1 Andrea Akins	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention a property that is subject to an unexpired lease.	bout any property of my estate that secures a debt and any personal
X /s/ Andrea Akins	x
Andrea Akins Signature of Debtor 1	Signature of Debtor 2
Date <b>April 16, 2018</b>	Date

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court Northern District of Illinois

In re	Andrea Akins		Case No.					
		Debtor(s)	Chapter 7					
	VE	VERIFICATION OF CREDITOR MATRIX						
		Number o	f Creditors:	59				
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of cred	itors is true and correct to	the best of my				
Date:	April 16, 2018	/s/ Andrea Akins						

Access Community Health 8946 Solution Center Chicago, IL 60677

Advocate Christ Medical Center Attn: Patient Accounts 4440 W. 95th St. Oak Lawn, IL 60453

Advocate Medical Group PO box 92523 Chicago, IL 60675

Affirm Inc Affirm Incorporated Po Box 720 San Francisco, CA 94104

AMCA Collection Agency 4 Westchester Plaza, Building 4 Elmsford, NY 10523

AMCA/American Medical Collection Agency Attention: Bankruptcy 4 Westchester Plaza, Suite 110 Elmsford, NY 10523

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

Childrens Surgical Foundation 737 N Michigan Ave #1650 Chicago, IL 60611

Citibank/The Home Depot Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 Comenity Bank/Ashley Stewart Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bank/Avenue Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bank/Carsons Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bank/Harlem Furniture Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bank/Pier 1 Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bank/Victoria Secret Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 45318

Comenity Capital/mprc Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Convergent Outsourcing, Inc. 10750 Hammerly Blvd, #200 Houston, TX 77043

Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193 DirecTV
Payment Center
PO Box 78626
Phoenix, AZ 85062

Dynamic Recovery Solutions PO Box 25759 Greenville, SC 29616

Genesis Bc/celtic Bank 268 S State St Ste 300 Salt Lake City, UT 84111

Great American Finance Attn: Bankruptcy 20 N Wacker Dr. Suite 2275 Chicago, IL 60606

Great American Finance 20 N Wacker Dr #2275 Chicago, IL 60606

Harris & Harris 111 W Jackson #400 Chicago, IL 60604

ICS PO Box 1010 Tinley Park, IL 60477

IICRDP -Integrated Imaging Consulta PO Box 95040 Chicago, IL 60694

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603 Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Kay Jewelers Attn: Bankruptcy Po Box 1799 Akron, OH 44309

Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

Laboratory Corp of America Holdings PO Box 2240 Burlington, NC 27216

Lurie Children's Hospital of Chicag PO Box 4066 Carol Stream, IL 60197

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Midwest Diagnostic Pathology PO Box 578 Park Ridge, IL 60068

Neb Medical Services 7646 W 159th St Orland Park, IL 60462

Nephrology Associates of N Illinois PO Box 3369 Oak Park, IL 60303

Nmac Attn: Bankruptcy Po Box 660360 Dallas, TX 75266 Progenity Inc 5230 S State Ann Arbor, MI 48108

Providea Health 10260 W 191st St Mokena, IL 60448

Pulmonary Consultants SC 12820 S Ridgeland Ave, Ste B Palos Heights, IL 60463

Radiology Imaging Consultants 75 Remittance Drive Dept 1324 Chicago, IL 60675

Swedish Covenant Hospital 5145 North California Avenue Chicago, IL 60625

Syncb/PLCC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/Toys R Us Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/ Old Navy Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Amazon Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896 Synchrony Bank/Lowes Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015

Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440

Transworld Systems 507 prudential Rd. Horsham, PA 19044

United Recovery Service, LLC 18525 Torrence Ave, Ste C-6 Lansing, IL 60438

US Cellular 8410 W. Bryn Mawr, Ste 700 Chicago, IL 60631

Vengroff Williams PO Box 4155 Sarasota, FL 34230

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

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B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In r	e Andrea Akins Case No.
	Debtor(s) Chapter <b>7</b>
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 940.00
	Prior to the filing of this statement I have received \$ 90.00
	Balance Due\$ <b>850.00</b>
2.	\$_335.00 of the filing fee has been paid.
3.	The source of the compensation paid to me was:
	■ Debtor □ Other (specify):
4.	The source of compensation to be paid to me is:
	■ Debtor □ Other (specify):
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> </ul>
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following service:  a. Representation of the debtors in any dischargeability actions, judicial lien avoidances, or any other adversary proceeding.
	b. Debtor is responsible for the 2 mandatory credit counseling classes.
	c. This fee agreement does not include representation in motions to redeem.

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In re	Andrea Akins	Case No.	
	Debtor(s)		

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.		
April 16, 2018	/s/ Julie M Gleason	
Date	Julie M Gleason 6273536	
	Signature of Attorney	
	Gleason & Gleason	
	77 W Washington, Ste 1218	
	Chicago, IL 60602	
	(312) 578-9530 Fax: (312) 578-9524	
	troy@chicagobk.com	
	Name of law firm	